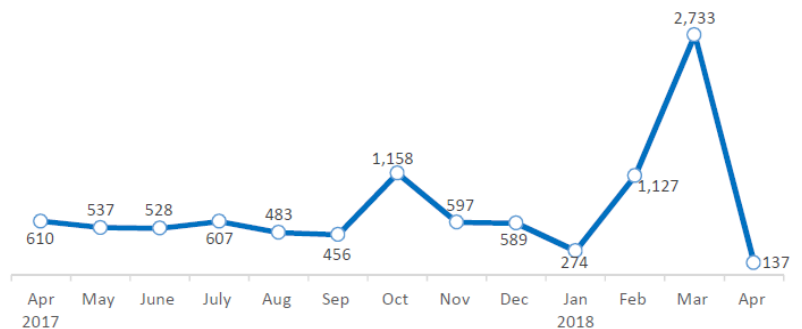


Rwanda

April 2018

137 Burundian new arrivals were received in April 2018.

Monthly New Arrivals Trend - Burundians | 2017-2018



KEY INDICATORS

239

Rwandan **returnees received** in April 2018.

525

Individuals including **New births** were recorded in April 2018

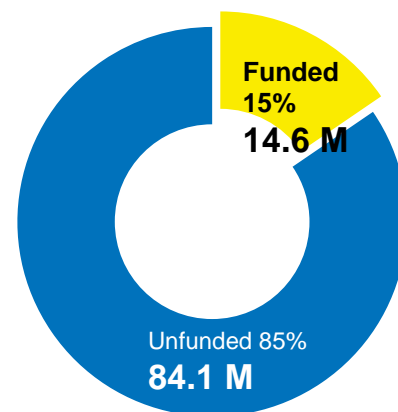
42

Refugees departed for resettlement to a third country in April 2018.

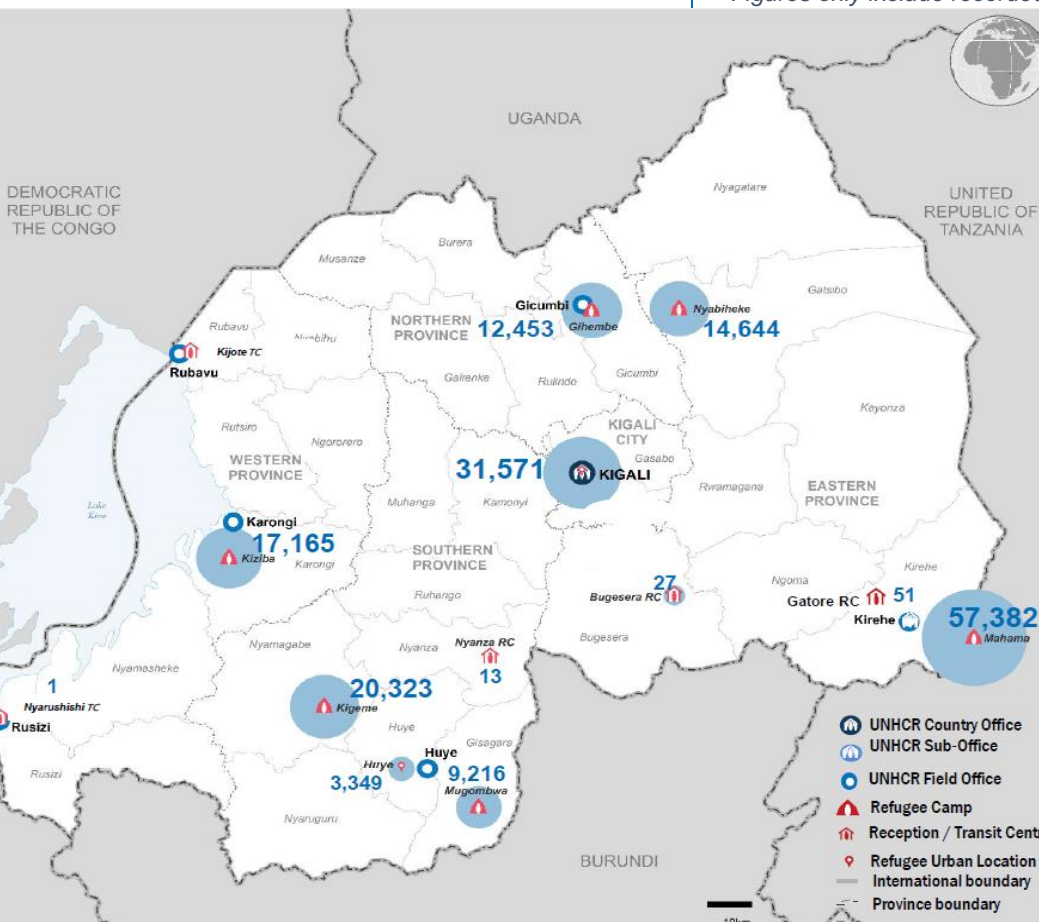
FUNDING (AS OF 30 APRIL)

USD 98.7 M

requested for the Rwanda situation (UNHCR)



Figures only include recorded contributions



Population Figures

Active Total 174,922
Refugees 166,195
Asylum Seekers (Pending) 8,727

CoO Breakdown

Burundi 90,280 54.3%
DRC 75,262 45.3%
Others 0.4% 653

Age Breakdown

0-17 49% **18-59 48%** **60+ 3%**

Monthly Registration Trends



Highlights

- Over 2,500 Burundians, who entered Rwanda in March 2018 from the Democratic Republic of the Congo (DRC) returned to Burundi on 1st and 2nd April 2018. The Government of Rwanda mobilized a fleet of buses to transport them to the border in Burundi in a safe and dignified manner.
- The UN High Commissioner for Refugees Filippo Grandi visited Rwanda from 8 April to 10 April 2018. He called on the international community to give increased support to the Democratic Republic of Congo, Rwanda, and Burundi.
- UNHCR and its partner maintained services in the Kiziba camp. There were also police patrols to provide security in the camp. Some hostility to the patrols from segments of the refugee community, in particular the youth, were observed.
- A joint GoR/UNHCR/NIDA verification exercise commenced in Gihembe Camp on 16 April 2018 with 50% of the refugee population being verified as at the end of April.
- A joint Eligibility Mission by the World Bank and UNHCR was organized in April 2018 to commence a two-step process: eligibility and project design for access to the International Development Agency (IDA) 18 financing.



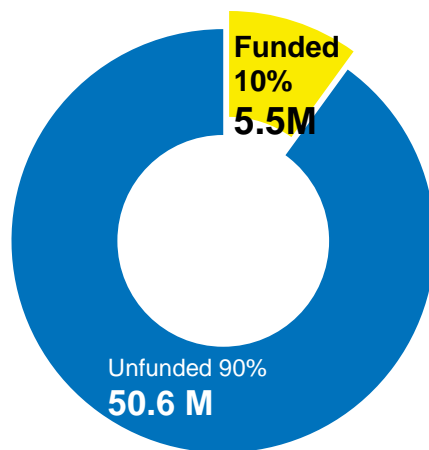
Representative UNHCR Rwanda, the UNHCR High Commissioner, and the Director of the UNHCR Regional Bureau for Africa.

Burundi Emergency Programme Update

FINANCIAL REQUIREMENT

USD 56.1 Million

FUNDING (AS OF 30 APRIL)



EDUCATION

Achievements and Impact

- The construction of eight primary classrooms is still ongoing in Mahama camp, with funding from Educate A Child (EAC). The 8 classrooms are double storey and once completed, the education facility will provide space for an additional 650 refugee students from Mahama camp.
- Construction of six Early Childhood Development (ECD) classrooms by UNICEF is still ongoing. Once completed, the facilities will accommodate approximately 500 children in Mahama camp.

Identified Needs and Remaining Gaps

- Three ECD centres are still covered in plastic sheeting. Urgent action is required to prevent a catastrophe that may arise from the existing dilapidated classrooms. About 60 permanent classrooms are needed to ensure better learning conditions for more than 4,000 refugee students in ECDs.
- Due to lack of funding, children in urban settings still cannot be supported with their education.



LIVELIHOODS

Achievements and Impact

- Umuco and Akeza karigura cooperatives in Mahama camp produced and sold woven baskets worth USD 657 during the month of April 2018. 10% of the total sales amount was saved in the cooperatives' bank account opened while 90% was distributed equally to all cooperative members.
- In April 2018, Inkomoko celebrated the graduation of the 2017 cohort of entrepreneurs who were trained in business development skills. 958 entrepreneurs (both Burundians and Congolese) were trained, of whom 39 got loans to grow their businesses, with 98% of the entrepreneurs successfully repaying the loans.



WATER AND SANITATION

Achievements and Impact

- OXFAM ensured the distribution of safe drinking water to refugees, the host communities and the schools in Mahama camp.
- The average monthly clean water supplied to beneficiaries in Mahama Camp was 20.02 Liters/person/day, which is above the UNHCR minimum standard of 20.0 liters/person/day. 117 water points (702 taps) are functional with an average of 82 users/tap in the camp
- Most of the civil works required for the extension of the permanent water treatment plant have been completed. The mechanical work remains pending as the equipment/machinery has not been delivered to the site.
- 30 vandalized water taps were replaced in 3 villages after establishing vandalism prevention mechanism with village leaders.
- GHDF ensured safe waste management with a weekly average 173.5 m³ of solid waste collected from the camp, 128.0 m³ of waste from latrines were dislodged on a weekly basis.
- Daily hygiene promotion activities were conducted in all communities in the camp where 53,115 individuals were reached, and in surrounding villages to increase awareness on best hygiene practices.

Identified Needs and Remaining Gaps

- A gap of 55 blocks of dischargeable latrines (220 drop holes) was identified; latrines are unevenly distributed in the camp.
- Lack of sufficient sanitation tools for use in the camp
- One dislodging truck with 6m³ capacity for dislodging latrines is not enough to cover the entire camp of Mahama.



SHELTER AND NFIS

Achievements and Impact

- 8 family shelters damaged by heavy rain were repaired and maintained.
- The construction of 120m masonry drainage for erosion control is in progress in village 7, 2.
- The construction of a Vocational Training Centre in Mahama camp is in progress.
- Plan International is constructing a Community Centre. Construction is currently at foundation level.

Identified Needs and Remaining Gaps

- 1,717 semi-permanent shelters require plastering /mudding to enhance their durability.
- There is a need for more funds to stabilize/restore 3,500 cubic meters of eroded gullies and also for drainage construction within the camp and host community.
- There is high prevalence of theft and vandalism of doors of shelters in Mahama Camp.



HEALTH

Achievements and Impact

- 54.5 consultations per day and per clinician were performed with 5.6/1,000 referrals to secondary and tertiary level hospitals; The top 3 morbidity diseases were: Upper Respiratory Tract Infections (URI) 47.8%, Non-Bloody Diarrhea 4.2%, Gastritis 3.7%;
- HIV staff from Save the Children Health Center conducted a study tour in 3 government health facilities (Nyamugali, Kirehe health centers and Kirehe district hospital) to learn best practices in regard to HIV program implementation.
- UNHCR and its health partners in Mahama camp closely collaborated with Kirehe District hospital and Partners in Health to improve maternal, community and child health.
- A specialist surgeon visited the health centre managed by ARC to identify patients with surgical needs. 80 cases will be referred to Kibungo hospital.

Identified Needs and Remaining Gaps

- Upper Respiratory Infections (URI) cases remains high and account for up to 47.8% of total consultations; due to climatic changes.
- There is not enough space for all HIV and Mental Health programs in Mahama II; the waiting areas of all health posts in Mahama I and Mahama II need to be enlarged;
- A high rate of Teenagers Pregnancies of 2.9% was reported this month.



FOOD SECURITY AND NUTRITION

Achievements and Impact

- Mass Mid-Up Arm Circumference (MUAC) screening, deworming and a Vitamin A supplementation campaign were conducted for all children under 5 years from 26 to 30 April 2018;

- 17 children aged between 6 to 59 months were admitted with Severe Acute Malnutrition (SAM);
- There is an ongoing tracing children for the upcoming Standardized Expanded nutrition survey (SENS) sample across the camp
- 56 cases of SAM (Severe Acute Malnutrition) and 458 MAM (Moderate Acute Malnutrition) are currently in nutrition programs receiving nutrition support.
- **8235** children under the age of 5 received Vitamin A and deworming following mass screening using MUAC (Mid Upper Arm Circumference) measurements

Identified Needs and Remaining Gaps

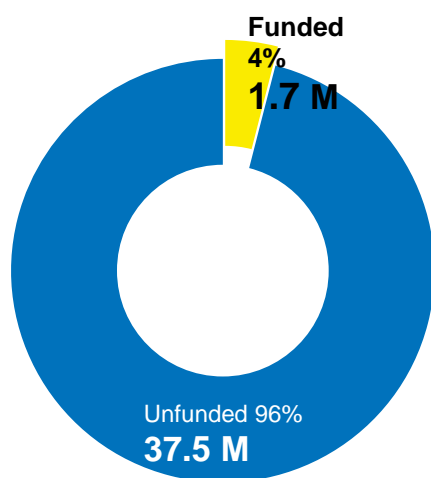
- There was a General food ration cut of 25% in the month of April, due to lack of funding.
- BSFP-SFP (Blanket Supplementary Feeding Program) distribution sites in Mahama need rehabilitation.

Congolese Refugee Programme Update

FINANCIAL REQUIREMENT

USD 39.2 Million

FUNDING (AS OF 30 APRIL)



DURABLE SOLUTIONS

Resettlement

- Total submissions in April 2018: 147 individuals (26 cases)
- Total submissions in 2018: 731 individuals (178 cases)

- Total departures in April 2018: 42 individuals (13 cases)
- Total departures in 2018: 171 individuals (52 cases)

** Submissions by Location: Kiziba- 07 cases / 42 individuals; Gihembe- 03 cases / 22 individuals; Nyabiheke- 14 cases / 66 individuals; Kigali- 02 cases / 17 individuals*



PROTECTION

Achievements and Impact

- Blankets, sleeping mats and soap were distributed to 29 detained refugees in Kibuye.
- A Protection Counselling in response to security concerns in Kiziba camp was conducted by FO Kibuye

Identified Needs and Remaining Gaps

- In April 2018, there was limited access to Kiziba camp due to security concerns.



EDUCATION

Identified Needs and Remaining Gaps

- Since 20 April 2018, all school activities stopped in Kiziba camp due to security concerns.
- The issue of different names (at school and on Proof or Registration (PoR)) for a number of students in Kigeme and Mugombwa is hindering their registration for national exams.
- The lack of school fees support in urban areas has resulted in some students relocating to the camp to access to education



LIVELIHOODS

Achievements and Impact

- In April 2018, Inkomoko celebrated the graduation of the 2017 cohort of entrepreneurs who were trained in business development skills. 958 entrepreneurs (both Burundians and Congolese) were trained, of whom 39 got loans to grow their businesses, with 98% of the entrepreneurs successfully repaying the loans.

Identified Needs and Remaining Gaps

- Limited space for individuals to open shops.
- Limited land for farming activities, particularly in Kigeme camp.
- Lack of start-up capital.



HEALTH

Achievements and Impact

- 45 consultations per day per clinician were performed; The main causes of consultations were: Upper and Low Respiratory Tract Infections 49% & 5% respectively, Gastro-intestinal tract infections at 6%, and Malaria at 3%
- The Health Centre in Nyabiheke camp is being rehabilitated, there is an extension of a maternity and delivery room, a pharmacy store and distribution points. All wooden doors will be replaced with metallic doors. The rehabilitation will improve the quality of services by reducing the waiting time at the pharmacy distribution point and controlling infections by decongesting the maternity service.
- In collaboration with the Rwanda Biomedical Centre (RBC), Gihembe and Nyabiheke Medical Coordinators were trained on Tuberculosis, Multidrug Resistance (MDR) and the management of other respiratory diseases.

- In collaboration with health, nutrition and WASH partners a community sensitization on good WASH practices was conducted in Mugombwa camp to reduce gastro-intestinal diseases.

Identified Needs and Remaining Gaps

- Patients' shower block in Kiziba camp health post has been destroyed due to heavy rainfall;
- Upper Respiratory Tract Infections remain high in all Congolese camps;
- Gastro-intestinal diseases increased in Mugombwa camp, due to delays in collecting waste to the garbage pit, poor drainage systems, inappropriate use of latrines and the lack of refugees' participation in cleaning WASH facilities;
- Ambulances do not meet the norms and standards as stipulated in the SOPs of the Ministry of Health.



FOOD SECURITY AND NUTRITION

Achievements and Impact

- The management of severe and moderate malnutrition for children under 5 was done at clinics outside the camp and at the camp clinics;
- The tracing of children in the SENS sample is ongoing in all camps except Kiziba camp.

Identified Needs and Remaining Gaps

- The general ration cut remains at 25% in all Congolese camps;
- Need for supplementary feeding for refugees with chronic illnesses (excluding diabetics) as well as the elderly in Gihembe and Nyabiheke camps;
- Insufficient fresh food for anaemic patients in Gihembe and Nyabiheke camps.



WATER AND SANITATION

Achievements and Impact

- An average of 23liters/pers/day was provide in Gihembe camp
- LDS conducted a technical field visit in Nyabiheke camp to follow up on the requirements for the project of connecting the camp to the district's water system (WASAC) to ensure regular supply of the required quantity of water. A WASAC technician explained to the team the 2 possible options for connecting the camp which includes temporary and long-term solutions.
- LDS visited the classrooms and latrines constructed at Kageyo secondary school. The team also carried out a visit to Gihembe camp to witness the status of the completed dischargeable latrine for phase. During the visit, relevant recommendations were provided on the maintenance.

- LDS constructed 39 blocks of dischargeable latrines each in Gihembe camp and 2 blocks at Kageyo Secondary school. Gihembe camp has a total number of 672 drop holes which give an average of 19 persons per drop hole.

Identified Needs and Remaining Gaps

- The average water supply in Nyabiheke camp remains below standard. During the reporting period an average of 13 liters per person per day was provided. Over RWF 50 million is needed to connect the camp to the district's water system (WASAC) to ensure the regular supply of the required quantity of water.
- The average number of showers in use remains below standards in both Gihembe and Nyabiheke camps. There is a need for an additional 295 showers rooms in both camps.
- Family latrines and showers are needed for 20 persons with disabilities who cannot easily access the communal latrines and showers in Gihembe camp.
- Communal facilities such as latrine blocks and showers are without lighting. This exposes refugees, particularly women and children, to SGBV risks for both Gihembe and Nyabiheke camps.



Achievements and Impact

- A bill of quantity for shelter activities in 2018 for both Gihembe and Nyabiheke camps (rehabilitation and transformation with iron sheet) was prepared and shared with the supply unit in UNHCR Kigali for action.

Identified Needs and Remaining Gaps

- Shelters in both Gihembe and Nyabiheke camps need to be expanded in order to accommodate the growing population.

Rwandan Returnee Programme Update

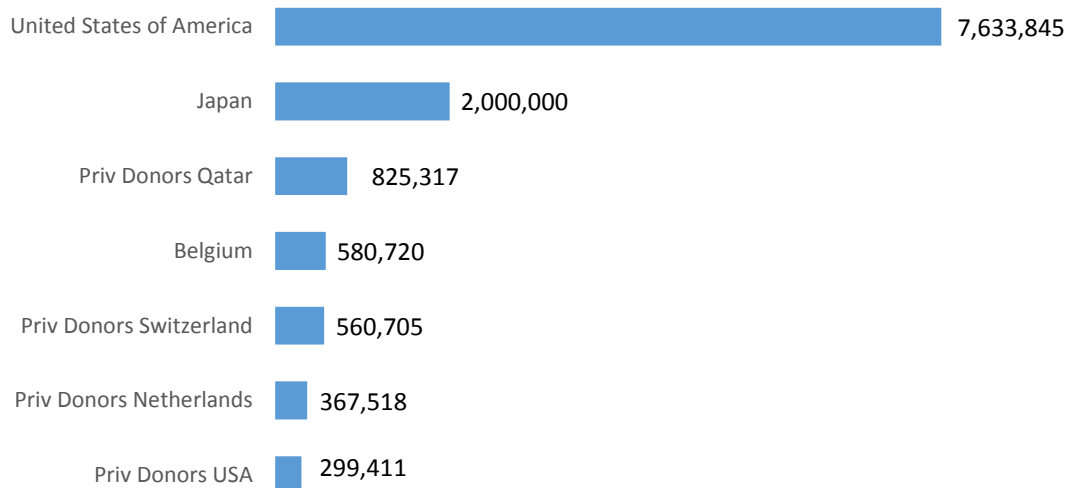
Achievements and Impact

- Since the beginning of 2018, 1,069 Rwandans have voluntarily repatriated from the DRC to Rwanda. In April 2018, 211 returnees were received through Kijote Transit Centre and 28 through Nyarushishi Transit Centre.
- Rwandan voluntary returnees pass through the transit centres where they are welcomed by UNHCR, MIDIMAR, Rwanda National Police and the National Identity Agency (NIDA) to go through the initial verification process. Throughout their stay at the transit centres, they are provided with accommodation, wet food, basic health services, clean water, sanitation facilities and supplies.
- Upon completion of the first screening process and prior to proceeding to their villages of origin, the genuine returnees are provided with a three-month food ration by WFP, as well as a cell-phone per household provided by UNHCR, as part of the Return Grant.
- Upon their arrival in the villages of origin, the local authorities conduct a second and final verification process. Those found genuine, aged 16 years old and above, are eligible to obtain a National Identity Card. MIDIMAR provides UNHCR with the list of genuine returnees together with details of their national identity cards, after which, UNHCR ensures the provision of a return grant (USD 250 per adult and USD 150 per child), through a mobile money arrangement, to all eligible/genuine returnees.

Financial Information

UNHCR is grateful for the critical support provided by donors who have contributed to this operation as well as those who have contributed to UNHCR programmes with unearmarked and broadly earmarked funds.

Funding received (in USD)



Figures only include recorded contributions

Working in partnership

- UNHCR, sister UN agencies and partners are grateful for the generous contributions of donors in support of refugees in Rwanda in 2018. Partners involved in the 2018 Regional Refugee Response Plan (RRRP) for the Burundi Situation in Rwanda include: UN Women, OXFAM, IOM, Save the Children International, UNFPA, UNICEF, WFP, WHO.
- Under the Refugee Coordination Model (RCM), UNHCR co-leads and coordinates with the Ministry of Disaster Management and Refugees (MIDIMAR) the interagency refugee response in Rwanda. The RCM is intended to provide an inclusive platform for planning and coordinating refugee response in order to ensure that refugees and other persons of concern receive the protection and assistance they require through collective efforts and capacities of all partners involved.

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Statistics: <http://data2.unhcr.org/en/situations/burundi> **UNHCR Rwanda:** www.unhcr.org/rw **Twitter:** @RefugeesRwanda